


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2005 8:00 am
Secretary of State

07-15-2005 90022 048 ***550.00

DOCUMENT # P98000031067		
1. Entity Name P.C.F. CLEANING SERVICE INC.		

Principal Place of Business 8241 NW 46TH ST FORT LAUDERDALE, FL 33351	Mailing Address 8241 NW 46TH ST FORT LAUDERDALE, FL 33351
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20064203

2. Principal Place of Business 8241 NW 46th	3. Mailing Address 8241 NW 46th
Suite, Apt. #, etc.	Suite, Apt. #, etc.



05092005 Chg-P CR2E034 (10/03)

City & State LAUDERHILL FL	City & State LAUDERHILL FL
Zip 33351	Zip 33351
Country USA	Country USA

4. FEI Number 65-0826584	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DOUGLAS, PATRICK A 8241 NW 46TH ST FORT LAUDERDALE, FL 33351	
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7. Name and Address of New Registered Agent Name M-A. AITCHESON & ASSOCIATES Street Address (P.O. Box Number is Not Acceptable) 9141 NW 5th St, Suite 104 City PLANTATION, FL FL Zip Code 33312	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DOUGLAS, PATRICK A 8241 NW 46TH ST FORT LAUDERDALE, FL 33351 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/05 954 895-8216
Date Daytime Phone



ATTACHMENT

20064203

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 20, 2005

P.C.F. CLEANING SERVICE INC.
8241 NW 46TH ST
FORT LAUDERDALE, FL 33351

SUBJECT: P.C.F. CLEANING SERVICE INC.
Ref. Number: P98000031067

As per your request here is your annual report.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Katrina Sutphin

Letter Number: 305A00036451